



ASBPO Update

SAFMLS 2002

Deputy Director, Armed Services Blood
Program



Agenda

- vCJD
- Recruiters, Phlebotomists, and BCA
- Policies
- Frozen Blood Modernization
- POM
- ONE and OEF
- ASBPO Initiatives



ASBPO Contact Information

- (703) 681-8024, DSN 761
- <http://www.tricare.osd.mil/asbpo/>



vCJD

- 2001 began with ARC announcement of intended vCJD donor deferrals “west of Urals”
- Target continued to move throughout the year
- Worked towards a national standard...close coordination with FDA, ARC, ABC,



DOD POLICY

- Variant CJD - Effective 29 October
 - Defers DoD Personnel stationed in Europe for over 6 months from 1980 - 1996
 - Reduces the deferral time in the UK from 6 months to 3 months
 - If you spent 5 years in Europe from 1980 on through the present and were not a DoD employee you would be deferred
 - After 1996 the 5 year deferral criteria applies regardless of why you were in Europe
 - If you received a transfusion in the UK from 1980 to the present you are deferred
 - Defers additional 18 percent of DoD Donor population
 - Prior to this DoD deferral rate was about 25%



Strategic Planning

- Convened conference to determine how ASBP would deal with deferrals
 - Concentrate on recruits and trainees
 - Identified key BDCs to receive additional staffing
 - Identified need for donor recruitment
 - Donor Education
 - Marketing – We ARE NOT the ARC!



Pitch to TMA

- Briefed Service Medical Resource Managers and gained \$3M to execute one year contract
 - Chopped \$ to Services for phlebotomists
 - Hired recruiters centrally through contractor
 - Limited short term marketing
 - Initiated BCA to determine costs, fully identify the current condition of the ASBP, and provide recommendations for change
- Personnel hired and the BCA on-going



Contract Phlebotomists

- Keesler AFB, MS - 4
- Great Lakes NH, IL - 4
- Eisenhower AMC, GA - 6



Donor Recruiters

- 13 Positions
- Keesler AFB
- WPAFB (Travis, Scott, Elmendorf)
- ASBBC – NCR and ASBBC – PNW
- NH Portsmouth, San Diego, and Charleston
- Fort Bragg, Gordon, Hood, Sam Houston, and Tripler AMC
- Falls Church Coordinator



Recruiting and Marketing

- ARC provides blood to all US hospitals at no cost...right?
- Marketing focused on ASBP branding
- Recruiters building BDC recruiter portfolios
 - CC, SNCO, and Unit briefings
 - SOPs and POCs for scheduling drives
- Education for senior line officers
 - Base Commander briefings
 - ASBP booth at Annual Service Meetings



Current and Future Marketing

- Define the target audience...18-24 y/o trainees
- Logo that clearly brands ASBP
- Educating senior line commanders
- Press kits, posters and education materials
- ASBP booth



BCA Data Call

- Building and using the tool was painful...
THANK YOU!
- Draft data analysis is in...we need to validate data from a few sites, no real surprises in the draft
 - BDCs not optimally located
 - Staffing insufficient
 - Small BDCs not as efficient as larger centers
 - USMC donors tend to be younger with limited European travel



BCA

- Initial data review (DRAFT) shows DoD average production cost to be 26% less than average ARC list price for packed cells
 - Most efficient BDC production costs 75% less than ARC
 - Least efficient BDC production costs 100% more than ARC
 - BDC location not linked to donor population or MTF utilization

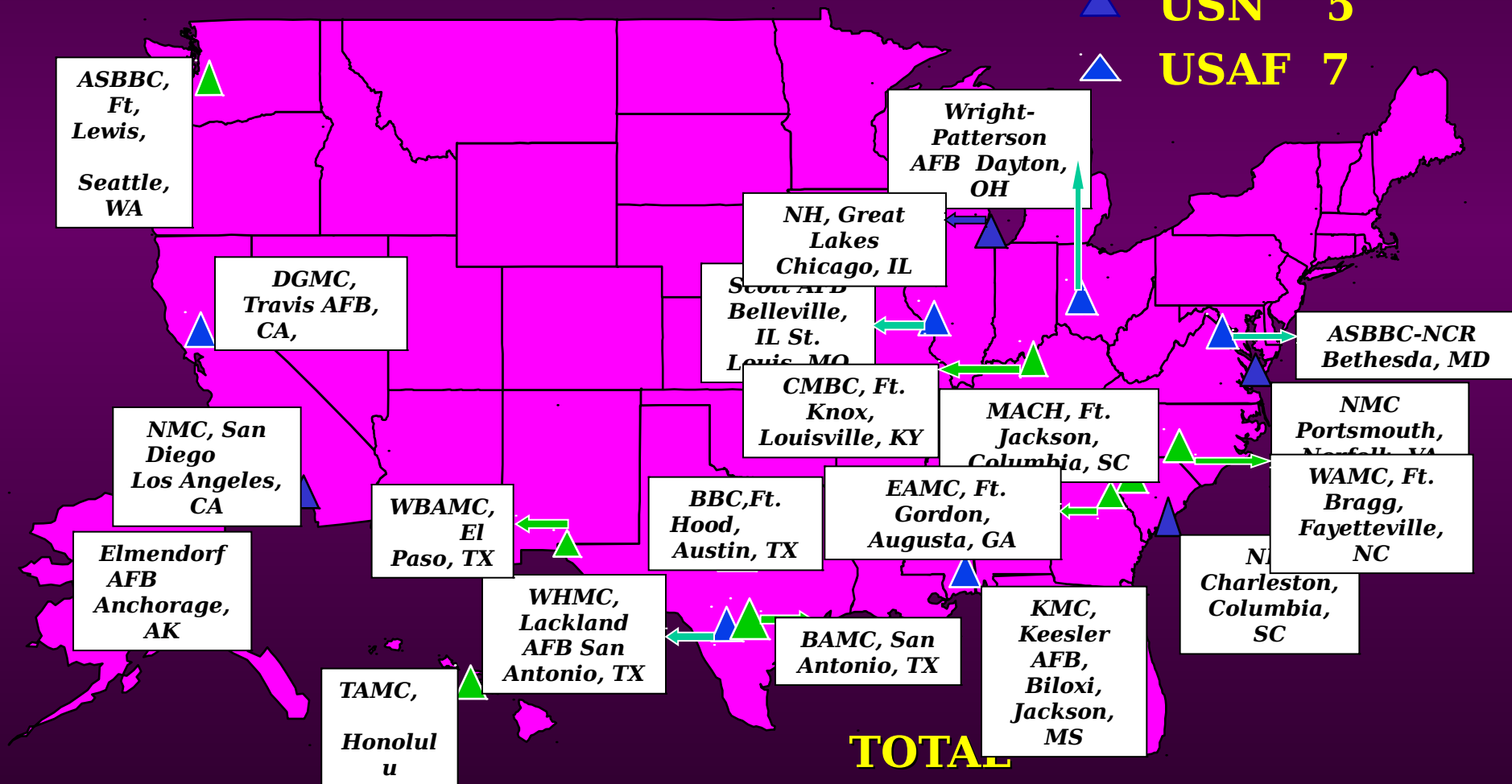


CONUS Military Donor Centers

▲ USA 10

▲ USN 5

▲ USAF 7





RECENT HEALTH AFFAIRS POLICY MEMORANDA

- Policy on the Use of Non-US Food and Drug Administration Licensed Blood Products – December 2001
- Policy on Blood Donor Deferral Criteria for vCJD, 9 Aug 01
- Blood Donation Support, 30 Aug 01 - Deputy SecDef – Service Secretaries, Service CoS, CJCS
- Policy on Blood Donor Deferral Criteria for vCJD, 13 Sep 01
- Operation Noble Eagle Policy Regarding Civilian Blood Collections on Military Installations, Leased Facilities, and Aboard Ships, 20 Sep 01



Blood Policy Letters

- BPL 01-01, Red Blood Cells – Frozen (RCF) labeling for HIV-1 Antigen Test, 11 Jan 01
- BPL 01-02 Not issued
- BPL 01-03, Consolidated BBOR Report, 29 May 01
- BPL 01-04, Policy for Use of Frozen Red Blood Cells, 2 Mar 01
 - BPL 01-04.1, revision 3 Aug 01



Blood Policy Letters

- BPL 01-05, Standardized Drug/Medication List, 14 Aug 01
 - BPL 01-05.1, Revised Malaria/vCJD list, 6 Sep 01
- BPL 01-06, Service Blood Product Quotas, 28 Feb 01
- BPL 01-07, Revision of vCJD Donor Deferral Criteria, 9 Aug 01
 - BPL 01-07.1, Revision of vCJD Donor Deferral Criteria, 7 Sep 01



Blood Policy Letters

- BPL 01-08, Revised Standardized Medical Conditions (Anthrax) List, 16 Nov 01



Frozen Blood Modernization

- >70% of total inventory is either expired and/or has not been tested for HIV-1 Ag
 - NAT can not be performed on these units
- Plans for use are not consistent with licensure (24hr vs. 72hr post thaw utilization, 2 units per bowl)
- We need to field a new & improved product and equipment



Current Readiness Requirements

- 68,600 total required to meet readiness needs
- 39,000 contingency stock required for Blood Product Depots
 - USPACOM: 34,000
 - USEUCOM: 5,000
- 19,600 contingency stock required for ships
- 10,000 contingency stock for ASWBPLs
 - Stock rotation and replacement



Replacement Plan

- 7 year plan: 189 units/week for replacement
- Frozen blood will be used (rotated) every 7 years which will minimize the need for testing frozen specimens when new tests are required
 - Frozen samples will be retained centrally for future testing
 - Samples will be PCR quality
- DRAFT plan calls for 65% O Pos, 35% O Neg
- Initial units (~18 months) CPDA-1 RCZ
- Evaluating more robust freezing bags



Replacement Cost

- ARC estimates deglycerolized frozen red cell units to cost \$500/unit (\$415 to freeze, \$85 to thaw & prepare)
 - Includes collection, testing, glycerolization, deglycerolization, personnel, and equipment
- DoD cost TBD by ongoing BCA
 - DoD cost expected to be lower
- ARC cost will be used for planning purposes until DoD costs are known
- 68,600 units x \$415/unit = \$28.5M

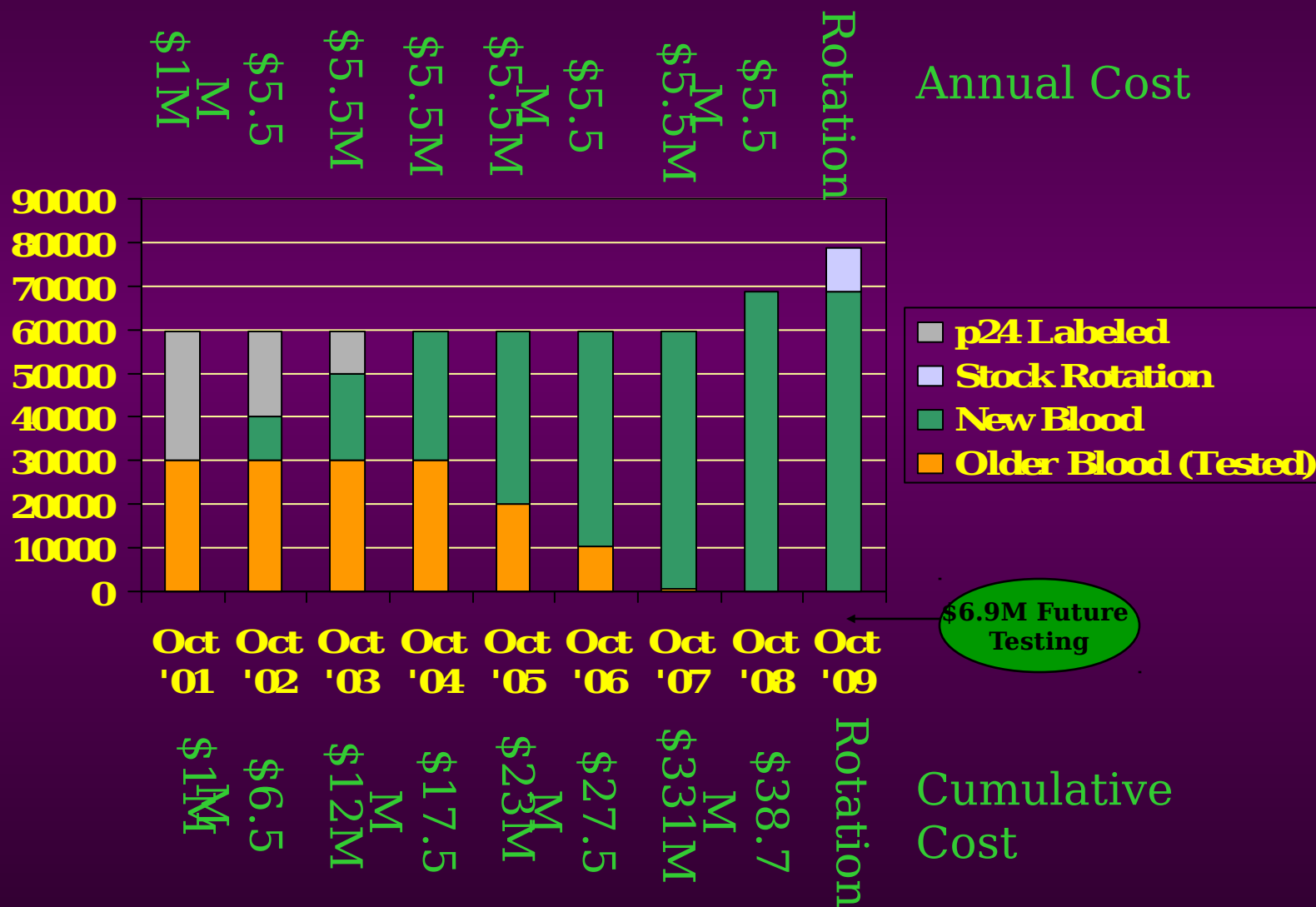


Usage and Rotation

- Need to use the product and rotate stock routinely in order to establish proficiency, clinician familiarity, and eliminate additional testing of frozen units
- New products to be fielded in the following priority:
 - Replacement of p24 labeled units worldwide
 - Ships
 - Blood Product Depots
 - ASWBPLs



Year Replacement Plan





ASBPO POM

- 04-08 Program Objective Memorandum
 - Frozen Blood Replacement
 - Donor Recruitment
 - Infectious Disease Testing
 - Leukoreduction
 - Blood Substitutes/Derivatives
 - Digitrax Donor ID System
 - R&D
- Submitted for 03-07 but was taken off the table
 - Will result in FY-03 UFRs due to NEW requirements
 - TMA parked \$20M in FY 05, FY 06, and FY 07 respectively
- Submitted FY-04 – 09 POM



OPERATION NOBLE EAGLE

- NEW ERA – SEPTEMBER 11, 2001
- Provided immediate blood support to NCA in response to Pentagon Terrorist activity
 - WRAMC, Ft. Meade, Bethesda, and USNS Comfort
 - Prepared for the worst
 - Evacuation of the Executive and Legislative Branches
 - Further attacks
 - Unknown numbers of casualties
 - Embassy bombings only recent experience



OPERATION NOBLE EAGLE

- Responded to a variety of issues due to civilian flight restrictions:
 - TAMC performed testing for Blood Bank of Hawaii
 - Provided blood storage support at ASWBPLs
 - Coordinated MILAIR for blood transit to NYBC
 - Provided storage for additional units from civilian agencies



NATIONAL RESPONSE

- Presented at the HHS Blood Safety and Availability Meeting – Jan 02
- Review HHS Federal Response Plan which makes the ARC Blood Manager upon activation
- Recommended
 - Establish Blood Management Responsibility with OEP or FEMA
 - Blood Distribution Management
 - Response cell manned by; ARC, ABC, DoD, AABB
 - Someone needs to be designated as lead
 - Responsibility could be Regional or National to identify shortages, source them and coordinate transportation through the Federal Response Plan
- \$\$\$\$ Who pays for transportation and the blood when national needs require movement?



ENDURING FREEDOM

- Supplying Blood to Europe, Southwest Asia and the Pacific
- As of 12 March 02
 - CENTCOM: 3658 RCZ, 185 FFP
 - EUCOM: 3800 RCZ, 146 FFP
 - Minor shipments to PACOM and SOUTHCOM
- Established resupply routes and a distribution system in Southwest Asia
- World wide effort involving entire Armed Services Blood Program

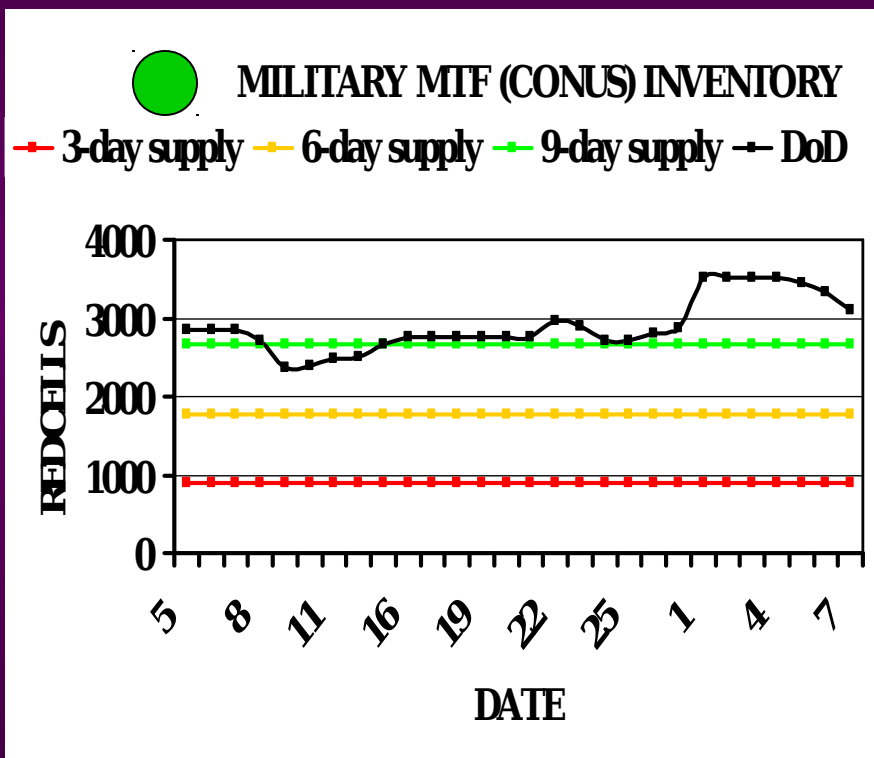


ENDURING FREEDOM

- ASBPO supports the Joint Blood Program Officers in the theater on issues of staffing, blood support, and movement of blood program elements
- Increased Services' ASWBPL quotas to support operation
 - ASWBPLs supports CENTCOM, EUCOM and PACOM
 - Support Guantanamo Bay, Cuba – SOUTHCOM
- Provide daily operational updates to the Army TSG, Executive Agent of the Armed Services Blood Program
- Provide ASBPO operational updates to the J4- Medical Readiness Division
- Establishing civilian blood contracts to support any need over ASBP capabilities



MILITARY AND CIVILIAN INVENTORY

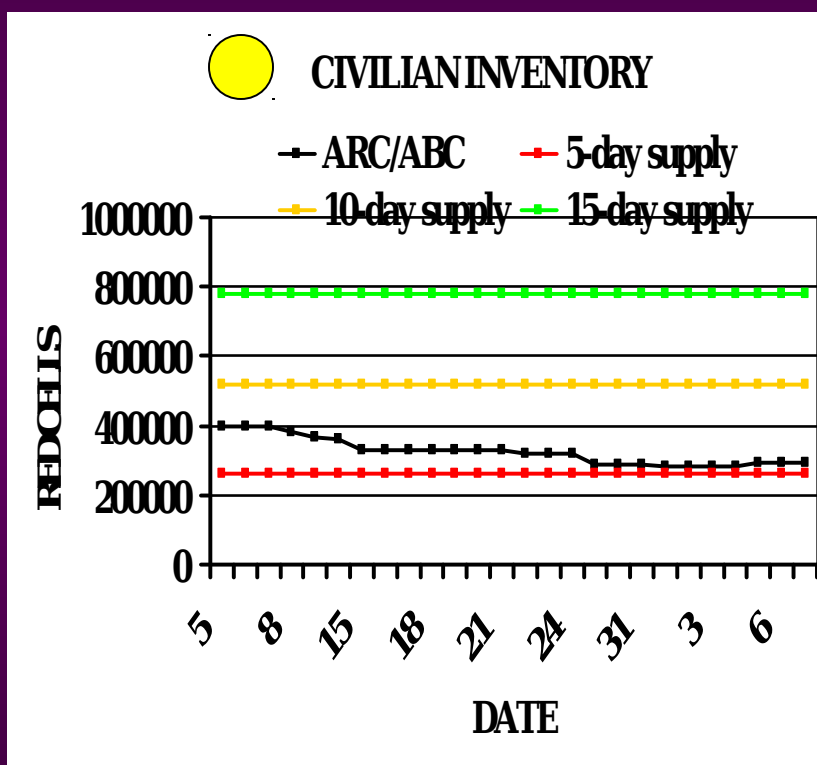


CONUS BLOOD SUPPLY

ARMY - 1599 TOTAL - 3101

NAVY - 672

AIR FORCE - 830



ARC - 120,031

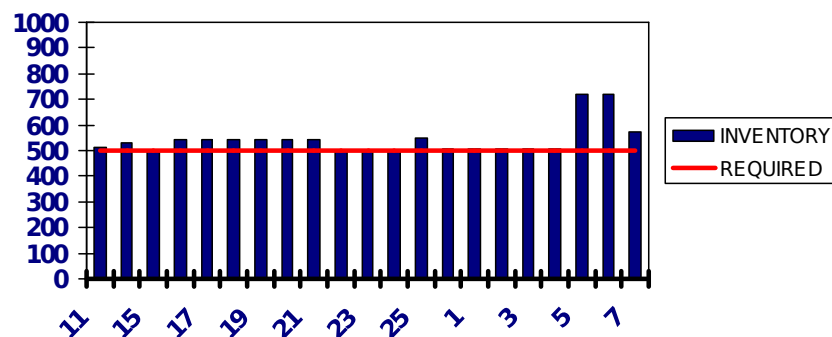
ABC - 175,000 *

TOTAL - 295,031

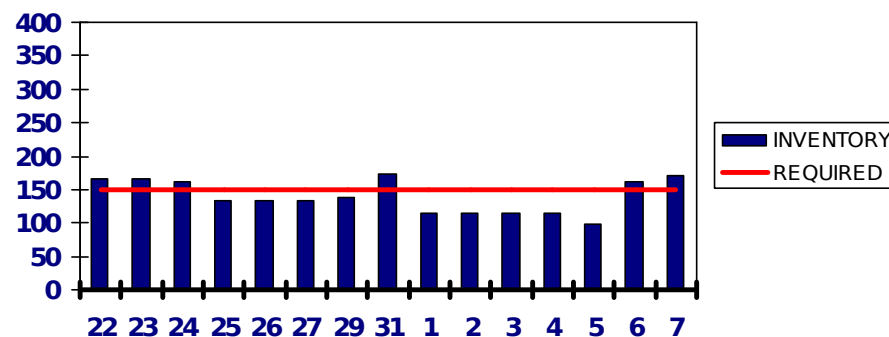


UNIFIED COMMAND BLOOD INVENTORY

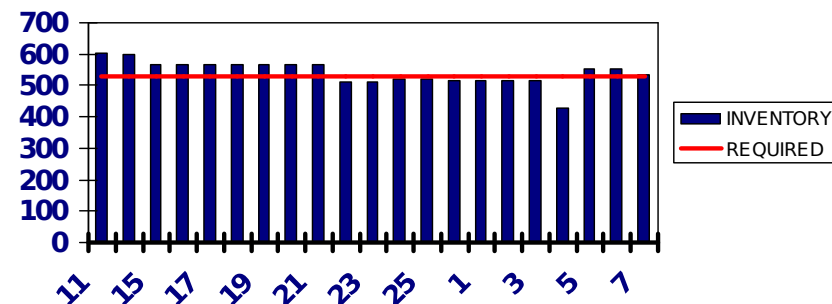
EUCOM



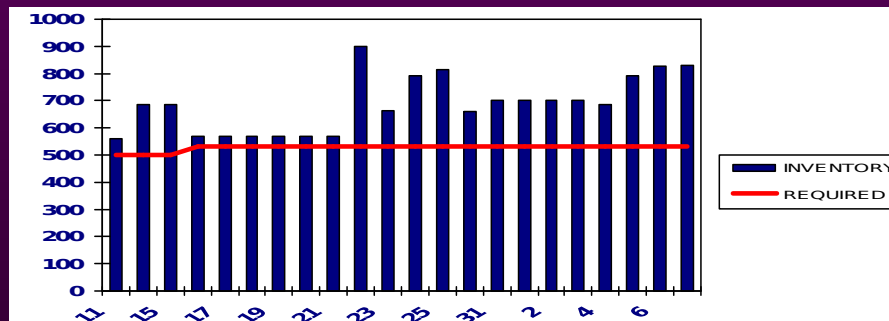
PACOM



CENTCOM



ASWBPL





INITIATIVES

- Business Case Analysis
 - Data Call complete
 - “As Is” review end of March
 - Analysis and COA June
- ABC Contract
 - Contract for blood in operational emergencies
- Navy Manpower Study
- ASBBC PACOM
 - Army, AF positions approved



INITIATIVES

- ASBBC EUCOM – MOU being worked
- Maintain recruiters
- R&D coordination and transition to private sector for marketing
- Training initiatives
 - Blood Distribution Course
 - Blackboard.com
- Collins Box validation
- ASBPO Website (directory update)
- Transition to licensed NAT



JOB WELL DONE!

- We have asked for a lot and you have responded...thank you
- Winds of change are blowing
 - BCA driven
 - Operational Support
 - Force Structure Changes
 - Donor Demographics
 - Our FDA Pals



Why We Exist

